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PTO/SB/01 (03-06)

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Application Number	10/587,513
Filing Date	
First Named Inventor	Casperon et al.
Title	REALTIME ELECTRONIC COMMUNICATION
Art Unit	
Examiner Name	
Attorney Docket Number	184/1US

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	
Name	Brian J. McKeon	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 3 forms are submitted.

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PTO/SB/81 (01-08)

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INDICATION FORM**

Application Number	10/667,513
Filing Date	
First Named Inventor	Casperson et al.
Title	REALTIME ELECTRONIC COMMUNICATION
Art Unit	
Examiner Name	
Attorney Docket Number	184/1US

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Steven A. Casperson</i>	Date	<i>8/17/2006</i>
Name	Steven A. Casperson	Telephone	
Title and Company			

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PTO/BBN 1 (01-09)
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Under the American Inventor Protection Act of 1999, all patents are required to respond to a citation of prior art within 3 months of the date of publication.

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number	10387,013
	Filing Date	
	First Named Inventor	Casper et al.
	Title	REALTIME ELECTRONIC COMMUNICATION
	Art Unit	
	Examiner Name	
Attorney Docket Number	1841US	

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Name	Registration Number

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Telephone (include area code): Email:

☒ I am the inventor(s) of the invention(s) described in the application.

☐ I am not the inventor(s) of the invention(s) described in the application. See 37 CFR 3.71, Paragraph (c)(2) of 37 CFR 3.73(d) is attached. (Form PTO/BBN/00)

SIGNATURE OF Applicant or Assignee of Record

Signature: [Signature] Date: 7/9/06

Name (Print): Bry Wayne Currell Telephone:

Title and Company: [Signature]

NOTE: Signature of all the inventor(s) or assignee(s) of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. (See 37 CFR 3.71)

☒ I declare that the information provided is true and correct.

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